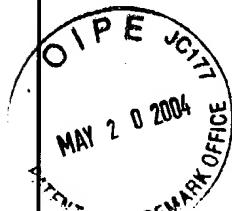


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**NOTICE OF APPEAL FROM THE EXAMINER TO THE  
BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)  
**2502491.991110**

In re Application of <b>NEIRINCKX, Rudi D.</b>	
Application Number	Filed
<b>09/584,978</b>	June 2, 2000
For	
<b>TREATMENT OF PSORIASIS THROUGH DOWN-REGULATION OF THE EGF-RECEPTOR WITH TOPICALLY-APPLIED EGF</b>	
Group Art Unit	Examiner
<b>1654</b>	<b>Jeffrey E. RUSSEL</b>

**Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, November 20, 2003, rejecting the following claims: 11-17.**

The fee for this Notice of Appeal is (37 CFR 1.17(b)) **\$ 330.00**

- Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: **\$ 165.00**.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 07-1896. I have enclosed a duplicate copy of this sheet.
- A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038**

I am the

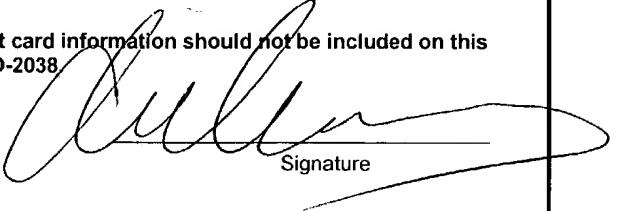
- applicant/inventor.
- assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed.

- attorney or agent of record.

- attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a).

  
**Dean H. Nakamura**

Typed or printed name

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**RECEIVED** **May 20, 2004**

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*. **TECH CENTER 1600/2900**

X \*Total of 2 forms are submitted.

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